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Florida Department of State

Division of Corporations Public Access System

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Division of Corporations

Fax Number

: (\$50)205-0383

: CORPORATION SERVICE COMPANY / SAC Account Name Account Number : T20000000195

Phone

(850) 521-1000

Fax Number

850-410-1015

LIMITED LIABILITY COMPANY

ARMSTRONG ARMENIA CROSSING DEVELOPMENT, LLC

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	NOV -9
ARMSTRONG ARMENIA CROSSING DEVELOPM	CHIT, LLC P
ARTICLE II - Address: The mailing address and street address of the prin	OF CORPORATIONS OF COR
Principal Office Address:	Malling Address:
13801 NORTH DALK NARRY TWY	15801 WORTH DALE MARRY EWY
SUITE 200	SULTE 200
TAMPA FL 33618	TAPEA IL 33618

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: The name and the Florida street address of the registered agent are:

AG ARMSTRONG DEVELOPMENT, LLC

13801 NORTH DALE MARRY EWY, SUITE 200
Florida street address (P.O. Rox NOT acceptable)

TAMPA FLORIDA 33618
City, State, and Zip

Having been named as registered agent and to eccept service of pracess for the above stated limited liability company at the place designated in this certificate. I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all standes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, Florida Standes.

Registered Acont's Signature

Page 1 of 2 (CONTINUED)

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ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
ALLEN GOINS - MGR	13801 NORTH DALE MABRY HWY SUITE 200 TAMPA FL 33618
KIRBY J. CAMPBELL - MGR	ONE ARMSTRONG PLACE BUTLER PA 16001
DRU A. SEDWICE - MGR	ONE ARMSTRONG PLACE BUTLER PA 16001
DAVID REAMS JAMIESON - MGR	ONE ARMSTRONG PLACE BUTLER PA 16001
(Use attachment if necessary)	
REQUIRED SIGNATURE: Significate of a member or en a	added if an effective date is requested. withorized representative of a member. A08(3), Florida Statutes, the execution of interesting and or the penalties of perjury up.)

DAVID REAMS JAMIESON

Typed or printed name of signee

Biling Fees: \$100.00 Filing Fee for Articles of Organization

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

5 5.00 Certificate of Status (Optional)